Fill in this information to identify your case:					
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA					
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13				

U.S.	BAN NAI	FILE	ED JPT IS D	C Y	CT 510
2017	FEB	23	PM	2:	07
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12/15



Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Part 1: Identify Yo	ourself	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is of government-issued pick identification (for exam your driver's license or	ture First Name ple, Sue	First Name
passport).	Middle Name	Middle Name
Bring your picture identification to your m	Cowan Last Name eeting	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last years		First Name
Include your married or	Middle Name	Middle Name
maiden names.	Last Name	Last Name
3. Only the last 4 digits your Social Security number or federal Individual Taxpayer	of xxx - xx - 3 1 1 OR	OR
Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	tor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case	number (if known)		
			About Debt	or 1:	,	About Debtor 2 (S	pouse Only in a Join	t Case):
4.	and E	ousiness names Employer	✓ I have	not used any business nam	es or EINs.	☐ I have not use	ed any business name	s or EINs.
	(EIN)	ification Numbers you have used in est 8 years	Business nam	е	i	Business name		
	Includ	le trade names and	Business nam	e		Business name		
	doing	business as names	Business nam	е		Business name		
			EIN			EIN _		
			EIN			EIN		
5.	Wher	e you live				If Debtor 2 lives at	t a different address	:
			1902 Fairl	naven Drive				
			Number S	treet		Number Street		
			Indianapo City	Olis IN 46229 State ZIP Cod		City	State ZIP Code	
			Marion					
			County			County		
			the one ab	ling address is different for ove, fill it in here. Note the end any notices to you at this lress.	at the	from yours, fill it i	ing address is differe in here. Note that the es to you at this maili	court
			Number S	Street		Number Street		*****
			P.O. Box			P.O. Box	199	
			City	State ZIP Cod	de	City	State ZIP Code	3
6.		you are choosing district to file for	Check one	:		Check one:		
		kruptcy	petitio	the last 180 days before filir on, I have lived in this distric n any other district.	ng this ot longer		180 days before filing ve lived in this district ther district.	
				e another reason. Explain. 28 U.S.C. § 1408.)		I have anothe (See 28 U.S.	er reason. Explain. C. § 1408.)	
F	Part 2	Tell the Cour	t About Your E	Bankruptcy Case				
7.	Ban	chapter of the kruptcy Code you	Check one: for Bankrupt	(For a brief description of e	each, see Notice to the top of pa	e Required by 11 U ge 1 and check the	J.S.C. § 342(b) for Ind appropriate box.	ividuals Filing
	are o	choosing to file er	✓ Chapte	r 7				
			☐ Chapte	r 11				
			☐ Chapte	r 12				
			☐ Chapte	r 13				

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Deb	tor 1 Pamela	Sue	Cowan	Case number (if known)	
	First Name	Middle Name	Last Name		
8.	How you will pay the fee	court fo	or more details about how you h cash, cashier's check, or mo	ny petition. Please check with the may pay. Typically, if you are pay oney order. If your attorney is sub credit card or check with a pre-pri	ring the fee yourself, you may mitting your payment on your
		☑ I need Individe	to pay the fee in installment uals to Pay Your Filing Fee in	s. If you choose this option, sign Installments (Official Form 103A).	and attach the Application for
		By law, than 15 fee in i	a judge may, but is not requing 50% of the official poverty line installments). If you choose the	ou may request this option only if red to, waive your fee, and may do that applies to your family size ar is option, you must fill out the App B) and file it with your petition.	o so only if your income is less ad you are unable to pay the
9.	Have you filed for	□ No			
	bankruptcy within the last 8 years?	✓ Yes.			
	•	District So	uthern District of Indiana	When 07/15/2013 MM / DD / YYYY	Case number <u>13-07485</u>
		District	· · · · · · · · · · · · · · · · · · ·	When	Case number
		District	b 1994 1994		
		District	L. 10011000	MM / DD / YYYY	Case number
10.	Are any bankruptcy	☑ No			
	cases pending or being filed by a spouse who is	Yes.			
	not filing this case with	Debtor		Relations	hip to you
	you, or by a business partner, or by an	District		When	Case number,
	affiliate?	-		MM / DD / YYYY	if known
		Debtor		Relations	hip to you
		District		When	Case number,
			33.4	MM / DD / YYYY	if known
11.	Do you rent your residence?	[V.]	Go to line 12. Has your landlord obtained a residence?	n eviction judgment against you a	nd do you want to stay in your
			No. Go to line 12.Yes. Fill out Initial State and file it with this bankr	ment About an Eviction Judgmen uptcy petition.	t Against You (Form 101A)

Debt	or 1	Pamela First Name	Sue Middle N	lame	Cowan Last Name	Case number (if	known)		
Pa	rt 3:	•			sses You Own as a S	Sole Proprietor			
	Are you of any the business individus separate	u a sole proprietor full- or part-time		No. (Name and location of bus Name of business, if any Number Street				
	If you h	ave more than one oprietorship, use a te sheet and attach it petition.			Health Care Busine Single Asset Real E Stockbroker (as det	ox to describe your business: ess (as defined in 11 U.S.C. § Estate (as defined in 11 U.S.C fined in 11 U.S.C. § 101(53A)) (as defined in 11 U.S.C. § 101	. § 101(51B))	ZIP Code	
13.	Chapte Bankre	ou filing under er 11 of the uptcy Code and u a <i>small busin</i> ess e?	<i>car</i> mo or i ☑	n set ap est rece if any c	opropriate deadlines. If you ant balance sheet, stateme of these documents do not I am not filing under Cha	re court must know whether you indicate that you are a smal nt of operations, cash-flow state exist, follow the procedure in apter 11.	I business de atement, and f 11 U.S.C. § 1	ebtor, you m federal inco 116(1)(B).	nust attach your ome tax return
	busine	definition of small ss debtor, see s.C. § 101(51D).			the Bankruptcy Code.	r 11 and I am a small busines			
Р	art 4:	Report If You	Own c	or Hav		roperty or Any Property	y That Nee	ds imme	ediate Attention
14.	prope allege immir	u own or have any rty that poses or is d to pose a threat of ent and identifiable		•	. What is the hazard?				
	safety any p	d to public health or ? Or do you own roperty that needs diate attention?			If immediate attention is	s needed, why is it needed?			
	perish livesto	cample, do you own pable goods, or ook that must be fed, o ding that needs urgent s?			Where is the property?	Number Street			
						City		State	ZIP Code

Debtor 1 Pamela Sue Cowan Case number (if known) ______

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	l am	not	require	d to	receive	a	briefing	about
			unselin					

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debt	or 1	Pamela First Name	Sue Middle Na	Cowan Last Name		Case number (if k	nown)
Pa	ırt 6:	Answer These	Questi	ons for Reporting Pu	rpos	es		
		ind of debts do you		Are your debts primarily	cons		ots ar	e defined in 11 U.S.C. § 101(8) isehold purpose."
			16b.			ness debts? Business debts ment or through the operation		debts that you incurred to obtain business or investment.
			16c.	State the type of debts yo	ou owe	that are not consumer or bus	iness	debts.
17.	Are yo	u filing under er 7?		No. I am not filing under	Chap	ter 7. Go to line 18.		
	any ex exclud admin are pa availal	u estimate that after tempt property is led and istrative expenses id that funds will be ble for distribution ecured creditors?	Ø	Yes. I am filing under Cha administrative exper ☑ No ☐ Yes	apter 7	7. Do you estimate that after a tre paid that funds will be avai	any ex lable	kempt property is excluded and to distribute to unsecured creditors?
18.		nany creditors do stimate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		nuch do you ate your assets to rth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		nuch do you ate your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)
Part 7:	Sign Below			
For you		and correct. If I have chos or 13 of title 1 proceed under If no attorney fill out this does I request relies I understand a connection without the I to th	en to file under Chapt 1, United States Code r Chapter 7. represents me and I cument, I have obtain if in accordance with the making a false statem th a bankruptcy case I.S.C. §§ 152, 1341, 1	declare under penalty of perjury that the information provided is true ter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, e. I understand the relief available under each chapter, and I choose to did not pay or agree to pay someone who is not an attorney to help me ed and read the notice required by 11 U.S.C. § 342(b). the chapter of title 11, United States Code, specified in this petition. nent, concealing property, or obtaining money or property by fraud in can result in fines up to \$250,000, or imprisonment for up to 20 years, 519, and 3571. Signature of Debtor 2 Executed on MM / DD / YYYY

Debtor 1	Pamela	Sue	Cowan	Cas	se number (if known)
	First Name you are filing this y without an	understar successfu	nd that many people fir	nd it extremely diffi tcy has long-term	rself in bankruptcy court, but you should icult to represent themselves financial and legal consequences, you are
•	represented by an you do not need to age.	and a mist did not file court, cas If that hap	take or inaction may affe a required document, p e trustee. U.S. trustee, b	ect your rights. For pay a fee on time, al pankruptcy administ	your bankruptcy case. The rules are very technical, example, your case may be dismissed because you tend a meeting or hearing, or cooperate with the rator, or audit firm if your case is selected for audit. er case, or you may lose protections, including the
		if you plar you do no exempt, y debts if do records, o	n to pay a particular debit list a debt, the debt mayou may not be able to ke something dishonest in light or lying. Individual bank truthful, and complete.	t outside of your bar by not be discharged eep the property. T n your bankruptcy c ruptcy cases are rar	ules that you are required to file with the court. Even hkruptcy, you must list that debt in your schedules. If d. If you do not list property or properly claim it as he judge can also deny you a discharge of all your ase, such as destroying or hiding property, falsifying ndomly audited to determine if debtors have been is a serious crime; you could be fined and
		attorney. you must and the lo	The court will not treat y	ou differently beca ed States Bankrupt	ects you to follow the rules as if you had hired an use you are filing for yourself. To be successful, cy Code, the Federal Rules of Bankruptcy Procedure, filed. You must also be familiar with any state
		Are you a conseque		ruptcy is a serious a	action with long-term financial and legal
	,	☐ No ☑ Yes			
		Are you a	aware that bankruptcy fron plete, you could be fined	aud is a serious crin I or imprisoned?	ne and that if your bankruptcy forms are inaccurate
		☐ No ☑ Yes			
			pay or agree to pay som	eone who is not an	attorney to help you fill out your bankruptcy forms?
		□ No ☑ Yes	. Name of Person <u>Re</u> Attach <i>Bankruptcy</i> i	egenia Smith Petition Preparer's I	Notice, Declaration, and Signature (Official Form 119).
		read and	ng here, I acknowledge t I understood this notice, e to lose my rights or pr	and I am aware tha	e risks involved in filing without an attorney. I have at filing a bankruptcy case without an attorney may operly handle the case.
		X Pame	ela Sue Cowan, Debtor	100-	X Signature of Debtor 2
		Date	3.21-17		Date MM / DD / YYYY
		Cont	act phone (317) 515-	0811	Contact phone
		Cell	phone		Cell phone
		Ema	il address		Email address

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: SOUTHERN D	ISTRICT OF INDIANA	
Case number (if known)		***************************************		Check if this is an amended filing
Official Form	106Sum			3

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Ourse and the Maria A	
	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	·
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$11,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$11,700.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$14,458.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$57,005.37
	Your total liabilities	\$71,463.37
P	art 3: Summarize Your Income and Expenses	
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,862.46
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,861.00

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Debte	or 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)
Pa	rt 4:	Answer Th	ese Questions for	Administrative	and Statistical Records
6.		_	ruptcy under Chapters		this box and submit this form to the court with your other schedules.
7.	─ What	kind of debt do y our debts are pri	imarily consumer deb	ts. Consumer debts	are those "incurred by an individual primarily for a personal,
	_ f	amily, or househol <mark>⁄our debts are no</mark>	d purpose." 11 U.S.C.	§ 101(8). Fill out line debts. You have no	es 8-9g for statistical purposes. 28 U.S.C. § 159. thing to report on this part of the form. Check this box and submit
8.			F Your Current Monthl ne 11; OR, Form 122B		r total current monthly income from 22C-1 Line 14. \$2,516.00
9.	Сору	the following spe	ecial categories of cla	ims from Part 4, line	e 6 of Schedule E/F:

	Total claim							
From Part 4 on Schedule E/F, copy the following:	From Part 4 on <i>Schedule E/F,</i> copy the following:							
9a. Domestic support obligations. (Copy line 6a.)	\$0.00							
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00							
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00							
9d. Student loans. (Copy line 6f.)	\$36,185.00							
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00							
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00							
9g. Total. Add lines 9a through 9f.	\$36,185.00							

Fill in this inf	amation to i	dantify your oo	and this filings		
			se and this filing:		
Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for	r the: SOUTHERN	DISTRICT OF INDIANA		
Case number	***************************************			☐ Check	if this is an
(if known)				amende	ed filing
○66:-:- Гаши	400 A /D				
Official Form					40/45
Schedule A/	B: Property	У			12/15
the asset in the ca filing together, bo sheet to this form	ategory where youth are equally re on the top of a	ou think it fits best. esponsible for supp any additional page	. List an asset only once. If an asset is a secomplete and accurate as possible grant of the complete and accurate as possible grant of the complete grant	possible. If two married pe space is needed, attach a s per (if known). Answer eve	ople are separate ry question.
Pail I. De	SCHDE Each is	(esidence, Dance	Jing, Lanu, or Other Near La	tate for Own or have	di iliterest ili
•		il or equitable inter	rest in any residence, building, land	l, or similar property?	
☑ No. Got ☐ Yes. Wh	to Part 2. here is the propert	ty?			
			all of your entries from Part 1, inclu Write that number here		\$0.00
Part 2: De	scribe Your V	/ehicles			
			st in any vehicles, whether they are cle, also report it on Schedule G: Exec		
3. Cars, vans, t	rucks, tractors,	sport utility vehicle	s, motorcycles		
□ No ☑ Yes					
3.1. Make:	Buick	Who ha Check	nas an interest in the property?	Do not deduct secured clai amount of any secured clai	•
Model:	Lucerne	☑ De	ebtor 1 only	Creditors Who Have Claim	s Secured by Property.
Year:	2009		ebtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate milea	age: 104,000		ebtor 1 and Debtor 2 only least one of the debtors and another		\$10,000.00
Other information:				ψισισσοίου	<u> </u>
2009 Buick Luc miles)	erne (approx. ¹		heck if this is community property ee instructions)		
			ther recreational vehicles, other veh craft, fishing vessels, snowmobiles, m		
☑ No ☐ Yes					
			all of your entries from Part 2, included	uding any	\$10,000.00

Debt	or 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
Pa	rt 3:	•		nd Household Items		
				erest in any of the following	g items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and les: Major applia		ns, china, kitchenware		
	☐ No ☑ Yes	s. Describe	household goods	S		\$1,000.00
7.	Electro Examp	les: Televisions	and radios; audio, v ctions; electronic de	ideo, stereo, and digital equi vices including cell phones,	pment; computers, printers, scanners; cameras, media players, games	
	□ No ☑ Ye	s. Describe	television			\$250.00
8.	Collect Examp	ti bles of value <i>les:</i> Antiques ar stamp, coin	nd figurines; painting n, or baseball card co	s, prints, or other artwork; bo llections; other collections, r	ooks, pictures, or other art objects; nemorabilia, collectibles	
	☑ No	s. Describe				
9.	Equip r <i>Examp</i>	nent for sports les: Sports, pho canoes and	otographic, exercise,	and other hobby equipment; ools; musical instruments	bicycles, pool tables, golf clubs, skis;	
	☑ No	s. Describe				
10.	Firearı Examp		es, shotguns, ammu	nition, and related equipmen	t	
	☑ No	s. Describe				
11.	Clothe Examp		clothes, furs, leather	coats, designer wear, shoes	accessories	
	☐ No	s. Describe	clothing			\$100.00
12.	Jewel Examp	r y bles: Everyday j gold, silvei		elry, engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	
	☑ No	o es. Describe				
13.		arm animals oles: Dogs, cats	, birds, horses			
	☐ Ye	o es. Describe				
14.	did no	ot list	and household item	s you did not already list, i	ncluding any health aids you	
		o es. Give specifi formation				
15.	Add t	he dollar value	of all of your entrie Write the number h	s from Part 3, including an	y entries for pages you have	\$1,350.00

Deb	tor 1	<u>Pamela</u>	Sue	Cowan	Case number (if known)						
		First Name	Middle Nan	ne Last Name							
P	art 4:	Describe Y	our Financia	al Assets							
Do	ou own	or have any le	gal or equitable	interest in any of the followi	Current value of the portion you own? Do not deduct secured claims or exemptions.						
16.	Cash Exampl	es: Money you l	nave in your wal	let, in your home, in a safe dep	posit box, and on hand when you file your						
	☑ No ☐ Yes	S			Cash:						
17.		•	ouses, and othe		of deposit; shares in credit unions, we multiple accounts with the same						
	□ No	S	I	nstitution name:							
		.1. Checking		Checking account		\$350.00					
		.2. Savings a	-	Savings account		\$0.00					
18.		ŭ	-								
		Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts									
	✓ No ☐ Yes	S	Institution of	or issuer name:							
19.		ıblicly traded st rest in an LLC,			corporated businesses, including						
	✓ No ☐ Yes	s. Give specific ormation about m			% of ownership:						
20.	Govern Negotia	nment and corp able instruments	orate bonds an include persona	d other negotiable and non-ral checks, cashiers' checks, pro							
	info	s. Give specific ormation about m	Issuer nam	ie:							
21.		nent or pensior les: Interests in profit-sharin	IRA, ERISA, Ke	ogh, 401(k), 403(b), thrift savir	ngs accounts, or other pension or						
		s. List each count separately	. Type of acco	ount: Institution name:							
22.	Your sl Examp		d deposits you h		ntinue service or use from a company ectric, gas, water), telecommunications						
	☑ No			Inality diameter and the district	ividual:						
23		s ies (A contract		Institution name or indi	vidual: u, either for life or for a number of years)						
۷.	M No □ Ye	•		ne and description:	a, said for the of for a maribul of yours)						

Debt		Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if k	nown)	
	Interest		A, in an account i		rogram, or under a qualified s	tate tuition pro	gram.
	☑ No						
					ely file the records of any intere		§ 521(c)
25.		equitable or future i exercisable for you		ty (other than anythi	ng listed in line 1), and rights	or	
	☑ No						
	_	Give specific mation about them					
26.				s, and other intellect	ual property; and licensing agreements		
	☑ No						
		. Give specific rmation about them					-
27.	Example	s, franchises, and o	_	-	on holdings, liquor licenses, pro	ofessional licen	ses
	☑ No	. Give specific					
		rmation about them					
Mor	ney or pr	operty owed to you	?				Current value of the
							portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you					
	☑ No □ Yes	. Give specific infor	mation			Federal	\$0.00
	abo	ut them, including wh	nether			State:	\$0.00
		already filed the retu the tax years				Local:	\$0.00
20	Family					Eoodi.	
29.	Family Example		sum alimony, spot	usal support, child sup	port, maintenance, divorce sett	lement, property	y settlement
	☑ No	. Give specific infor	mation		Alim	nony:	\$0.00
	Птез	. Give specific infor	mation			ntenance:	\$0.00
						pport:	\$0.00
						orce settlement	
					Pro	perty settlemen	t: \$0.00
30.			isability insurance إ		enefits, sick pay, vacation pay, v made to someone else	workers'	
	✓ No ☐ Yes	s. Give specific infor	mation				
31.	Interes Exampl	ts in insurance polices: Health, disability	cies , or life insurance; l	nealth savings accoun	t (HSA); credit, homeowner's, o	r renter's insura	ince
	□ No						
		 Name the insurant npany of each policy 					
		l list its value		ne:	Beneficiary:	St	urrender or refund value:
				urance through W	estern		
			& Southern no cash val	ue	daughter		\$0.00

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Deb	tor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	-
32.	If you a	re the beneficiar	y that is due you from y of a living trust, expendently because someone		iled insurance policy, or are currently	
	☑ No ☐ Yes	s. Give specific	nformation			
33.	Exampl			t you have filed a laws insurance claims, or rig	suit or made a demand for payment hts to sue	
	✓ No ☐ Yes	s. Describe each	ı claim			
34.		contingent and use set off claims	ınliquidated claims o	of every nature, includ	ing counterclaims of the debtor and	
	✓ No ☐ Yes	s. Describe each	ı claim			
35.	Any fin	ancial assets y	ou did not already lis	t		
	☑ No ☐ Yes	s. Give specific	information			
36.					ny entries for pages you have	\$350.00
D.	ert 5:	Describe An	v Business Polat	od Proporty Vou (• Own or Have an Interest In. List any	roal actata in Part 1
37.	☑ No.	. Go to Part 6. s. Go to line 38.	ny legal or equitable	interest in any busine	ss-related property?	
						Current value of the portion you own? Do not deduct secured
38.	Accour	nts receivable o	r commissions you a	already earned		claims or exemptions.
	✓ No ☐ Yes	s. Describe				
39.		les: Business-re	ishings, and supplied lated computers, softwar, electronic devices		copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe				
40.	Machin	nery, fixtures, ed	լսipment, supplies ye	ou use in business, ar	nd tools of your trade	
	☑ No ☐ Yes	s. Describe				
41.	Invento	ory				
	☑ No ☐ Yes	s. Describe				
42.	Interes	ts in partnershi	ps or joint ventures			
	☑ No ☐ Yes	s. Describe I	Name of entity:		% of ownership:	

Official Form 106A/B Schedule A/B: Property page 5

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Deb	tor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
43.	Custon	ner lists, mailing list	s, or other comp	ilations		
	☑ No ☐ Yes	s. Do your lists inclu No Yes. Describe	•	lentifiable informatic	on (as defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related prope	erty you did not a	already list		
	✓ No ☐ Yes	s. Give specific inforr	mation.			
45.					any entries for pages you have 	\$0.00
Pa				mercial Fishing- farmland, list it in	Related Property You Own or Have an Part 1.	n Interest In.
46.	Do you	own or have any le	gal or equitable i	nterest in any farm-	or commercial fishing-related property?	
		Go to Part 7. s. Go to line 47.				
47	Fa					Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Example No Yes	es: Livestock, poultry	y, farm-raised fish	ı		
48.	Crops-	-either growing or h	arvested			
		s. Give specific				
49.	Farm a	nd fishing equipmer	nt, implements, n	nachinery, fixtures, a	and tools of trade	
	☑ No □ Yes	S				
50.		nd fishing supplies,	chemicals, and	feed		
	✓ No ☐ Yes	3				
51.	Any fai	m- and commercial	fishing-related p	property you did not	already list	
		s. Give specific				
52.			-	-	any entries for pages you have	\$0.00
Р	art 7:	Describe All Pro	perty You Ov	vn or Have an Int	erest in That You Did Not List Above	
53.	-	have other property les: Season tickets, o		ı did not already list' bership	?	
	☑ No □ Yes	s. Give specific infor	mation.			

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case nu	mber (if known)		
	=	all of your entries fro		at number here		→	\$0.00
						>	\$0.00
56. Part 2	2: Total vehicles, l	line 5		\$10,000.00			
57. Part	3: Total personal a	and household items,	line 15	\$1,350.00			
58. Part	4: Total financial a	assets, line 36		\$350.00	,		
59. Part	5: Total business-	related property, line	45	\$0.00			
60. Part	6: Total farm- and	fishing-related prope	rty, line 52	\$0.00			
61. Part	7։ Total other proբ	perty not listed, line 5	4 +	\$0.00			
62. Total	personal propert	y. Add lines 56 throu	gh 61	\$11,700.00	Copy personal property total	+	\$11,700.00
63. Total	of all property on	Schedule A/B. Ad	d line 55 + line 62				\$11,700.00

Official Form 106A/B Schedule A/B: Property page 7

Debtor 1	<u>Pamela</u>	Sue	Cowan				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)		Middle Name	Last Name				
United States Ba	inkruptcy Court for the	SOUTHERN	DISTRICT OF I	NDIANA		Check if this is an amended filing	
Case number (if known)						amended ning	
Official Form	106C						
Schedule C	: The Property	/ You Clain	n as Exemp	ot			04/16
Jsing the property space is needed, f	vou listed on Schedu	<i>lle A/B: Property</i> is page as many	(Official Form 106	SA/B) as your sour	rce, list the	ponsible for supplying correct info property that you claim as exempl sary. On the top of any additional	t. If more
s to state a spec exempted up to the eceive certain be exemption of 100	ific dollar amount as he amount of any appenefits, and tax-exem	exempt. Alternate plicable statutore pt retirement fur ue under a law the exempte.	atively, you may y limit. Some ex ndsmay be unl aat limits the exe	claim the full fair temptionssuch a imited in dollar a mption to a partic	r market va as those fo mount. Ho cular dolla	ou claim. One way of doing so alue of the property being or health aids, rights to owever, if you claim an ramount and the value of the estatutory amount.	
Part 1: Ide	entify the Propert	ty You Claim	as Exempt				
. Which set of	f exemptions are you	ı claiming?	Check one only,	even if your spous	se is filing w	vith you.	
C.	claiming state and fed		tcy exemptions.	11 U.S.C. 8 522(b)(3)		
☐ You are	claiming federal exen	nptions. 11 U.S.0	C. § 522(b)(2)	11 0.0.0. 3 022(0	,,(0)		
_	claiming federal exen perty you list on Sch					elow.	
2. For any prop Brief description	_	edule A/B that y	ou claim as exer rrent value of portion you		ormation b	elow. Specific laws that allow exemp	otion
2. For any prop Brief description	perty you list on School	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n	mpt, fill in the info	ormation be		otion
2. For any properties of the second s	perty you list on School of the property and late lists this property	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n py the value from	Amount of the exemption you Check only one each exemption	claim box for		
E. For any properties of the second section of the section of the second section of the section of the second section of the section of the second section of the section of the second section of the second section of the section of	perty you list on School of the property and lists this property	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n py the value from hedule A/B	Amount of the exemption you Check only one each exemption \$\frac{1}{100\%}\$ of fair	claim box for 0.00 ir market	Specific laws that allow exemp	
2. For any properties of the second s	perty you list on School of the property and lists this property	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n py the value from hedule A/B	Amount of the exemption you Check only one each exemption	claim box for 0.00 ir market o any	Specific laws that allow exemp	
2. For any properties of the second s	perty you list on School of the property and lists this property	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n py the value from hedule A/B	Amount of the exemption you Check only one each exemption \$\sqrt{1,000}\$ \$\sqrt{100\%} of fair value, up to applicable slimit	claim box for 0.00 ir market o any statutory	Specific laws that allow exemp	1
Brief description: nousehold goo Line from Schedul Brief description:	perty you list on School of the property and lists this property	edule A/B that y line on Cu the ow Co	ou claim as exer rrent value of portion you n py the value from hedule A/B \$1,000.00	Amount of the exemption you Check only one each exemption \$1,000 100% of fair value, up to applicable silimit	claim box for 0.00 ir market o any statutory 1.00 ir market o any	Specific laws that allow exemption and the specific laws that allow exemption and the specific laws that allow exemption and the specific laws that allow exemption are specific laws that allows the specific laws the specific laws that allows the specific laws the specific laws that allows the specific laws that allows the specific laws that allows the specific laws the spe	1
2. For any properties of the schedule A/B the Brief description: nousehold good ine from Schedule Brief description: television	perty you list on School of the property and lat lists this property	edule A/B that y line on Cu the ow Col Sci	ou claim as exer rrent value of portion you n py the value from hedule A/B \$1,000.00	Amount of the exemption you Check only one each exemption \$\sqrt{1,000}\$ \$\sqrt{100\%} \text{ of fair value, up to applicable simit} \$\sqrt{250}\$ \$\sqrt{100\%} \text{ of fair value, up to applicable simit}	claim box for 0.00 ir market o any statutory 1.00 ir market o any	Specific laws that allow exemption and the specific laws that allow exemption and the specific laws that allow exemption and the specific laws that allow exemption are specific laws that allows the specific laws the specific laws that allows the specific laws the specific laws that allows the specific laws that allows the specific laws that allows the specific laws the spe	1

☐ No☐ Yes

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Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case numbe	er (if known)
Part 2:	Additional	Page			
	ription of the pro A/B that lists this	pperty and line on property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
Brief descr clothing Line from 3	ription: Schedule A/B:	11	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	
	ription: g account Schedule A/B:	17.1	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	
Brief desc Savings Line from	•	17.2	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	

Fill in this inf	ermetion to ide	ntify your ooc				
Debtor 1	ormation to ide	Sue	Cowan			
Deptor	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for th	ne: SOUTHERN [DISTRICT OF INDIAN	Α		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
		/ho Have Cla	aims Secured b	y Property		12/15
correct information on the top of any 1. Do any credi	on. If more space in additional pages, votors have claims so	s needed, copy the write your name a ecured by your promit this form to the	ied people are filing tog e Additional Page, fill it nd case number (if know operty? court with your other sch	out, number the entri wn).	es, and attach it to thi	s form.
Part 1: Lis	st All Secured C	laims				
claim, list the creditor has a	red claims. If a cre- creditor separately a particular claim, lis sible, list the claims ne.	for each claim. If n t the other creditors	nore than one s in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the	ne property that	\$14,458.00	\$10,000.00	\$4,458.00
Indiana Finance Creditor's name PO Box 49 Number Street	e Co.	2009 Buic 104000 mi	k Lucerne (approx. iles)			
Anderson City Who owes the de Debtor 1 only Debtor 2 only Debtor 1 and At least one o Check if this to a commun	Debtor 2 only f the debtors and ar claim relates ity debt	Conting Unliquic Dispute Nature of li An agre Statuto Judgme Vother (i Car Lo	dated den. Check all that apply ement you made (such a ry lien (such as tax lien, re ent lien from a lawsuit including a right to offset	r. as mortgage or secured nechanic's lien)	l car loan)	
Add the dollar va	ilue of your entries	in Column A on t	his page. Write	\$14,458.00	7	

page 1

\$14,458.00

all pages. Write that number here:

If this is the last page of your form, add the dollar value totals from

Fill in this i	Fill in this information to identify your case:						
Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name				
Debtor 2		Middle Name	Last Name				
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA							
Case number (if known)				Check if this is amended filing			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1.	Do any creditors	have priority	unsecured	claims	against	vou?
1.	Do any creditors	nave priority	unsecureu	Cialilis	ayanısı	y Ou :

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

otal claim Priority Nonpriority amount amount

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Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
	riist Name	Middle Name	Last Name		
Part 2:	List All of	Your NONPRIORI	TY Unsecured Claim	ıs	
3. Do ar	ny creditors have	nonpriority unsecure	d claims against you?		
	No. You have noth	ning to report in this par	t. Submit this form to the	court with you other schedules.	
Ø	Yes				
If a cr	reditor has more th of claim it is. Do n	an one nonpriority unso ot list claims already in	ecured claim, list the credicluded in Part 1. If more t	er of the creditor who holds each claim. Itor separately for each claim. For each claim liste han one creditor holds a particular claim, list the o the Continuation Page of Part 2.	
					Total claim
4.1					\$1,800.00
Aaron's I			Last 4 digits of accor	unt number	-
	Creditor's Name Paces Ferry		When was the debt in		
Number	Street			e, the claim is: Check all that apply.	
		GA 30303	Disputed		
City		State ZIP Code	Type of NONPRIORI	ΓY unsecured claim:	
		Check one.	☐ Student loans		
	r 1 only r 2 only		_	g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2 o	-	•	port as priority claims or profit-sharing plans, and other similar debts	
	st one of the debto		Other. Specify	· · · · · · · · · · · · · · · · · · ·	
		or a community debt	Installment Co	ntract	
✓ No	m subject to offse	er			
Yes					
4.2					\$536.89
L	inancial, LP		Last 4 digits of accor	unt number 8 3 2 7	
Nonpriority (Creditor's Name		When was the debt in		
PO Box 6 Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Sauk Rap City		MN 56379 State ZIP Code		TV	
•		Check one.	Type of NONPRIORIT	Trunsecured claim:	
<u> </u>	r 1 only r 2 only			g out of a separation agreement or divorce	
	r 1 and Debtor 2 o	nly	,	eport as priority claims	
	st one of the debto		Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	k if this claim is fo	or a community debt	HSBC Nevada	Bank	
	m subject to offse	et?			
☑ No ☐ Yes					

Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
	riistivame	Middle Name	Last (vallie		
Part 2:	Your NONE	PRIORITY Unsecu	ıred Claims Cont	inuation Page	
After listing previous	- •	this page, number the	em sequentially from th	ne	Total claim
4.3					\$824.13
	inancial, LP		Last 4 digits of acc	ount number <u>6</u> <u>3</u> <u>7</u> <u>2</u>	
PO Box			When was the debt		
Number	Street		As of the date you Contingent	file, the claim is: Check all that apply.	
			Unliquidated		
Sau Rap	ids ľ	VIN 56379	Disputed		
City Who incu		State ZIP Code Check one.	Type of NONPRIOR	RITY unsecured claim:	
	r 1 only	Shook one.	☐ Student loans ☐ Obligations arisi	ng out of a separation agreement or divorce	
	or 2 only or 1 and Debtor 2 or	nlv	that you did not	report as priority claims	
	st one of the debtor			n or profit-sharing plans, and other similar debts	
Chec	k if this claim is fo	r a community debt	Other. Specify Capital One E	Bank	
	im subject to offse	et?			
✓ No ☐ Yes					
4.4			1 6 4 - 1116 6	t	\$2,694.25
Nonpriority	roperty Manager Creditor's Name		Last 4 digits of acc When was the debt		
Landma Number	n Beatty, Lawye Street	rs		file, the claim is: Check all that apply.	
	ystone Crossing	, Ste. 870	Contingent	,	
			Unliquidated Disputed		
Indianap		N 46240 State ZIP Code			
•		Check one.	Type of NONPRIOR Student loans	RITY unsecured claim:	
فستنا	or 1 only or 2 only		Obligations aris	ing out of a separation agreement or divorce	
	or 1 and Debtor 2 or	nly	•	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	st one of the debto	rs and another	Other. Specify	n or prone-sharing plants, and other shrindi debte	
		or a community debt	Contract Brea	ach	
Is the cla	im subject to offse	et?			
Yes					
4.5					\$2,000.00
	leadow Apartme	nts	Last 4 digits of acc	ount number	
129 Dipl	Creditor's Name omat t.		When was the deb		
Number	Street		As of the date you Contingent	file, the claim is: Check all that apply.	
			Unliquidated		
Beech G	Grove I	IN 46107	Disputed		
City	_	State ZIP Code Check one.		RITY unsecured claim:	
	rred the debt? or 1 only	Oncor one.	☐ Student loans	ing out of a separation agreement or divorce	
Debto	or 2 only	alv		report as priority claims	
-	or 1 and Debtor 2 or est one of the debto		=	n or profit-sharing plans, and other similar debts	
LI		or a community debt			
	im subject to offse	et?			
☑ No □ Yes					

Debtor 1	Pamela	Sue	Cowan	Case number (if known)	
	First Name	Middle Name	Last Name		
Dort Or	Vous NON	PRIORITY Unsecui	ad Claime Cont	inuation Page	
Part 2:					Proceedings of pools in the state of the sta
After listing previous		this page, number the	m sequentially from th	e	Total claim
4.6					\$953.71
CBCS	A 10 1 11		_ Last 4 digits of acc	ount number <u>3 2 7 3</u>	
PO Box	Creditor's Name 163279		When was the debt		
Number	Street			file, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
0 - 1		OU 42246	Disputed		
Columbs City		OH 43216 State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
		Check one.	Student loans		
Debto	or 1 only or 2 only			ng out of a separation agreement or divorce	
	or 1 and Debtor 2 o	nly	•	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	ist one of the debto	ors and another	Other. Specify	o. p.o onaming plants, and outer onitial dobte	
_		or a community debt	Teachers CU		
	im subject to offs	et?			
☑ No □ Yes					
4.7					\$151.75
	nity Health Netw Creditor's Name	vork	_ Last 4 digits of acc		
PO Box			When was the debt		
Number	Street		_ Contingent	file, the claim is: Check all that apply.	
			Unliquidated		
Indianap	nolis	IN 46219	Disputed		
City		State ZIP Code	Type of NONPRIOF	RITY unsecured claim:	
	urred the debt? or 1 only	Check one.	☐ Student loans		
<u></u>	or 2 only			ing out of a separation agreement or divorce report as priority claims	
	or 1 and Debtor 2 c	•	☐ Debts to pensio	n or profit-sharing plans, and other similar debts	
ш	ast one of the debto		Other. Specify		
-		or a community debt	Medical		
Is the cla	nim subject to offs	etr			
Yes					
4.8					\$730.00
	gent Outsourcin	g	Last 4 digits of acc	count number 9 6 4 7	
Nonpriority PO Box	Creditor's Name		When was the deb	- Anna Anna Anna Anna Anna Anna Anna Ann	
Number	Street			file, the claim is: Check all that apply.	
			☐ Contingent ☐ Unliquidated		
			Disputed		
Renton City		WA 98057 State ZIP Code	Type of NONDRIO	RITY unsecured claim:	
•	urred the debt?	Check one.	Student loans	arra anacourou olumn	
	or 1 only		Obligations aris	sing out of a separation agreement or divorce	
	or 2 only or 1 and Debtor 2 o	only	•	report as priority claims	
_	ast one of the debt		Other. Specify	on or profit-sharing plans, and other similar debts	
☐ Chec	ck if this claim is t	for a community debt	T-Mobile		
	aim subject to offs	set?			
☑ No □ Yes					

Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	· · · · · · · · · · · · · · · · · · ·
Part 2:	Your NO	NPRIORITY Unsecu	ıred Claims Con	tinuation Page	
After listi previous		on this page, number the	em sequentially from t	ne	Total claim
4.9					\$1,868.00
Credit C	ollection		Last 4 digits of acc	ount number 4 9 7 8	
	Creditor's Name		When was the debt		
PO Box Number	Street		As of the date you Contingent Unliquidated	file, the claim is: Check all that apply.	
Manua		MA 00000	Disputed		
Norwood City	<u> </u>	MA 02062 State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
Debto		Check one. conly cotors and another for a community debt	Student loans Obligations aris that you did not	ing out of a separation agreement or divorce report as priority claims n or profit-sharing plans, and other similar debts	
_	im subject to of		Weulcai		
4.10					\$318,23
Credit C	ollection Serv	ices	Last 4 digits of acc	ount number 4 9 7 8	
	Creditor's Name		When was the deb		
725 Can Number	Street		As of the date you	file, the claim is: Check all that apply.	
			Contingent		
		101E-10 - 1	Unliquidated □ Disputed		
Norwoo	d	MA 02062	— Disputed		
Debto	irred the debt? or 1 only or 2 only or 1 and Debtor 2 ast one of the del	State ZIP Code Check one. 2 only btors and another	Student loans Obligations aris that you did not	RITY unsecured claim: ing out of a separation agreement or divorce report as priority claims in or profit-sharing plans, and other similar debts	
_	k if this claim is	for a community debt	Progressive	insurance	
	im subject to of		.,		
4.11					\$468.07
	rotection		Last 4 digits of acc	count number <u>0</u> <u>9</u> <u>0</u> <u>0</u>	
Nonpriority PO Box	Creditor's Name		When was the deb	t incurred? 2015	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
		A DESCRIPTION OF THE PROPERTY	Contingent Unliquidated		
Addison		TX 75001	Disputed		
City		State ZIP Code	Type of NONPRIO	RITY unsecured claim:	
	Irred the debt? or 1 only	Check one.	Student loans		
اسندا	or 2 only			ing out of a separation agreement or divorce report as priority claims	
Debte	or 1 and Debtor 2	· -		on or profit-sharing plans, and other similar debts	
·		btors and another	Other. Specify		
		for a community debt	Bright House	Networks	
Is the cla ✓ No ✓ Yes	im subject to o	ffset?			

Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
Part 2:	Your NON	PRIORITY Unsecu	red Claims Cont	inuation Page	
After listing		this page, number the	em sequentially from th	е	Total claim
4.12					\$1,063.00
	rotection Assoc	iation	Last 4 digits of acco	ount number	\$1,063.00
Nonpriority (Creditor's Name		When was the debt		
Number	oel Road, Ste. 2 Street	100		ile, the claim is: Check all that apply.	
			Contingent Unliquidated	, , , ,	
Dallas		TX 75240	Disputed		
City		State ZIP Code	Type of NONPRIOR	ITY unsecured claim:	
	rred the debt?	Check one.	Student loans		
<u> </u>	r 1 only r 2 only		—	ng out of a separation agreement or divorce	
	r 1 and Debtor 2 o	nly	•	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	st one of the debto	ors and another	Other. Specify	To profit-straining plans, and other similar debts	
☐ Checl	k if this claim is f	or a community debt	Verizon Wirele	ess	
	im subject to offs	et?			
☑ No ☐ Yes					
4.13					\$1,254.54
	ed Consultants		Last 4 digits of acc	ount number <u>2 9 5 3</u>	
PO Box	Creditor's Name 551268		When was the debt		
Number	Street			ile, the claim is: Check all that apply.	
***************************************			☐ Contingent ☐ Unliquidated		
			Disputed		
Jackson City	ville	FL 32255 State ZIP Code		1777	•
•	rred the debt?	Check one.	• •	ITY unsecured claim:	
☑ Debto	or 1 only		Student loans Obligations arisi	ng out of a separation agreement or divorce	
_	or 2 only	. 1		report as priority claims	
	or 1 and Debtor 2 o est one of the debto	•)	n or profit-sharing plans, and other similar debts	
			Other. Specify		
		or a community debt	Verizon Wirel	ess	
No No	im subject to offs	etr			
Yes					
4.14					\$128.66
Emerger	ncy Phys of Ind	ianapolis	Last 4 digits of acc	ount number 7 4 7 4	
Nonpriority	Creditor's Name		When was the debt	incurred? 2016	
Number	7112 Dept #31 Street		As of the date you	file, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Indianap	oolis	IN 46207	─ ☐ Disputed		
City		State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
Dobte	rred the debt?	Check one.	☐ Student loans		
	or 1 only or 2 only			ng out of a separation agreement or divorce	
	or 1 and Debtor 2 o	only	•	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	st one of the debt	ors and another	Other, Specify	in or pront-straining plants, and other strinial debts	
☐ Chec	k if this claim is f	or a community debt	Medical		
is the cla	im subject to offs	set?			
☑ No □ Yes					

Debtor 1	Pamela	Sue	Cowan	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2	Your NON	PRIORITY Unsecui	ed Claims Cont	inuation Page	
After listi previous		this page, number the	m sequentially from th	е	Total claim
4.15					\$36,185.00
FedLoar	n Servicing		Last 4 digits of acco	ount number	
Nonpriority PO Box	Creditor's Name		When was the debt	incurred? 2015	
Number	Street		As of the date you f	ile, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
			Disputed		
Harrisbu City		PA 17106 State ZIP Code	Town of NONDBIOD	ITVa a sured alaims	
•		Check one.	Student loans	ITY unsecured claim:	
المكيا	or 1 only			ng out of a separation agreement or divorce	
	or 2 only or 1 and Debtor 2 o	nlv	•	report as priority claims	
	ast one of the debto	•	Other. Specify	n or profit-sharing plans, and other similar debts	
Chec	k if this claim is fo	or a community debt			
Is the cla	im subject to offs	et?			
☑ No □ Yes					
4.16					\$452.00
	llections		_ Last 4 digits of acc	ount number	
Nonpriority PO Box	Creditor's Name		When was the debt		
Number	Street			file, the claim is: Check all that apply.	
			☐ Contingent ☐ Unliquidated		
			Disputed		
Louisvil City	lle	KY 40269 State ZIP Code	Type of NONDRIGE	RITY unsecured claim:	
•	urred the debt?	Check one.	Student loans	arra unsecureu ciann.	
<u> </u>	or 1 only		Obligations arisi	ng out of a separation agreement or divorce	
	or 2 only or 1 and Debtor 2 c	only		report as priority claims n or profit-sharing plans, and other similar debts	
At lea	ast one of the debto	ors and another	Other. Specify	n or prone-snaming plants, and other similar debte	
☐ Chec	ck if this claim is f	or a community debt	Medical		
	aim subject to offs	et?			
☑ No □ Yes					
4.17					\$714.00
	& Harris LTD		Last 4 digits of acc		
	/ Creditor's Name Jackson Blvd. S	400	When was the deb		
Number	Street			file, the claim is: Check all that apply.	
Chinage		U 60604	─ ☐ Disputed		
Chicago City	U	IL 60604 State ZIP Code	Type of NONPRION	RITY unsecured claim:	
	urred the debt?	Check one.	Student loans		
اسنا	tor 1 only tor 2 only		-	ing out of a separation agreement or divorce	
	tor 1 and Debtor 2 o	only	•	report as priority claims on or profit-sharing plans, and other similar debts	
At le	ast one of the debt	ors and another	Other. Specify	e. b. e.	
☐ Che	ck if this claim is f	for a community debt	Medical		
	aim subject to offs	set?			
☑ No □ Yes					

Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
Part 2:	Your NON	PRIORITY Unsecu	red Claims Cont	inuation Page	
After listing		this page, number the	m sequentially from th	e	Total claim
4.18	p=9				\$2,015.00
ĻJ .	State University		Last 4 digits of acc	ount number	Ψ2,013.00
Nonpriority (Creditor's Name		When was the debt		
Office Pa	arsons Hall Street		As of the date you	file, the claim is: Check all that apply.	
200 CN.	7th St.		_	,	
			Unliquidated Disputed		
Terre Ha	ute	IN 47809	Disputed		
City Who incu	rred the debt?	State ZIP Code Check one.	• •	ITY unsecured claim:	
	r 1 only	oncon onc.	Student loans	ng out of a separation agreement or divorce	
Debto	r 2 only			report as priority claims	
ш	or 1 and Debtor 2 o st one of the debto	•	☐ Debts to pensio	n or profit-sharing plans, and other similar debts	
_		or a community debt	Other. Specify		
	im subject to offs		Loan		
☑ No	iii subject to ons	CLI			
Yes					
4.19					#40.44
	L		Look 4 digits of soc	ount number 2 9 0 0	\$43.14
IU Health Nonpriority	n Creditor's Name		Last 4 digits of acc		
	hadeland Ave.		When was the debt		
Number	Street		_ Contingent	file, the claim is: Check all that apply.	
			Unliquidated		
Indianap	nolie	IN 46219	Disputed		
City	10119	State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
- D-1-1-	rred the debt?	Check one.	Student loans		
لظ	or 1 only or 2 only		ш -	ing out of a separation agreement or divorce	
	or 1 and Debtor 2	only	· · · · · · · · · · · · · · · · · · ·	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	st one of the debt	ors and another	Other. Specify	To profit offaring plants, and other official desire	
☐ Chec	k if this claim is f	or a community debt	Medical		
	im subject to offs	set?			
✓ No ☐ Yes					
4.20					\$676.77
	uley Clinic		Last 4 digits of acc	ount number <u>3 4 1 8</u>	
Nonpriority 5259 Da	Creditor's Name vid St		When was the deb	incurred? 2016	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			☐ Contingent ☐ Unliquidated		
•			— ☐ Disputed		
Indianap	oolis	IN 46226 State ZIP Code			
City Who inc u	irred the debt?	Check one.	**	RITY unsecured claim:	
☑ Debto	or 1 only		Student loans Obligations aris	ing out of a separation agreement or divorce	
	or 2 only	only	that you did not	report as priority claims	
I	or 1 and Debtor 2 one of the debt	•		n or profit-sharing plans, and other similar debts	
		for a community debt	Other. Specify Medical		
	im subject to off	-	Hicultai		
☑ No	,				
Yes					

Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)	
	гиостуанне	эличие гчате	Last Ivanie		
Part 2:	Your NON	PRIORITY Unsecu	red Claims Cont	inuation Page	
After listing previous		this page, number the	m sequentially from th	ne	Total claim
4.21					\$61.26
Med-1 So			Last 4 digits of acc	ount number <u>9 9 4 5</u>	
	Creditor's Name Highway 31 N		When was the debt	incurred? 2015	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			☐ Contingent ☐ Unliquidated		
			Disputed		
City		IN 46142 State ZIP Code		NTV d alaims	
•		Check one.	Student loans	RITY unsecured claim:	
<u> </u>	r 1 only			ing out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2 o	าไง	· ·	report as priority claims	
	st one of the debto	•	Other. Specify	n or profit-sharing plans, and other similar debts	
☐ Checl	k if this claim is fo	or a community debt	<u> </u>	lealth Network	
	m subject to offse	et?			
☑ No ☐ Yes					
4.22					\$996.00
	Revenue Grou	9	Last 4 digits of acc	ount number	
	Creditor's Name Creek Dr		When was the debt	The state of the s	
Number	Street			file, the claim is: Check all that apply.	
			Contingent Unliquidated		
			─ ☐ Disputed		
Lombaro City		IL 60148 State ZIP Code	Type of NONPRIOR	RITY unsecured claim:	
		Check one.	Student loans	arranasarran	
الشا	or 1 only or 2 only			ing out of a separation agreement or divorce	
	r 1 and Debtor 2 o	nly	-	report as priority claims n or profit-sharing plans, and other similar debts	
At lea	st one of the debto	rs and another	Other. Specify	in or profit charing plane, and other chimici debte	
		or a community debt	Medical		
	im subject to offs	et?			
✓ No ☐ Yes					
_					
4.23					\$789.72
	I Revenue Grou Creditor's Name	р	Last 4 digits of acc		
991 Oak	Creek Dr		When was the deb		
Number	Street		Contingent	file, the claim is: Check all that apply.	
			Unliquidated		
Lombard	d	IL 60148	─ ☐ Disputed		
City		State ZIP Code	Type of NONPRIO	RITY unsecured claim:	
	rred the debt? or 1 only	Check one.	Student loans		
ب	or 2 only			ing out of a separation agreement or divorce report as priority claims	
_	or 1 and Debtor 2 o	-		on or profit-sharing plans, and other similar debts	
ш	st one of the debto		Other. Specify	•	
1		or a community debt	St. Francis H	ospital	
Is the cla	im subject to offs	et (
Yes					

Debtor 1	Pamela	Sue Middle Name	Cowan Last Name	Case number (if known)	
Part 2:	First Name Your NO	NPRIORITY Unsecu		nuation Page	
After listin		on this page, number the	m sequentially from the		Total claim
Nonpriority (rld Collections Creditor's Name vstone Crossi Street		_ ☐ Contingent ☐ Unliquidated		\$281.25
Indianapolis City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes			☐ Disputed Type of NONPRIORIT ☐ Student loans ☐ Obligations arising that you did not re ☐ Debts to pension of Other. Specify Indy South Foo		

Debtor 1	Pamela	Sue	Cowan	Case number (if known)
	First Name	Middle Name	Last Name	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 👍	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$36,185.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$20,820.37
	6j.	Total. Add lines 6f through 6i.	6j.	\$57,005.37

Debtor 1 Pamela Sue Cowan First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name Last Name Last Name	First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA	Fill in this infe	ormation to ider	ntify your case:		
(Spouse, if filing) First Name Middle Name Last Name	(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA	Debtor 1				
(Opodoo, It limitg) The trains	United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA		First Name	Middle Name	Last Name	
		, ,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this info	ormation to ic	dentify your case	:	
	Pamela First Name	Sue Middle Name	Cowan Last Name	1200000
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	·
United States Ban	nkruptcy Court fo	the: SOUTHERN D	ISTRICT OF INDIAN	<u> </u>
Case number (if known)				

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ✓ No ✓ Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D. Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

F	II in this inform	ation to identify	your case:			l	
	Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name		Che	ck if this is:
	Debtor 2					П	An amended filing
	Spouse, if filing)	First Name	Middle Name	Last Name	NIA NI A		A supplement showing postpetition
1	Jnited States Bankrเ Case number	uptcy Court for the:	SOUTHERNL	DISTRICT OF IND	JIANA		chapter 13 income as of the following date:
ŀ	(if known)				-		MM / DD / YYYY
<u>Of</u>	ficial Form 10	<u>61</u>					
Sc	hedule I: You	ur Income					12/15
res incl abo you	ponsible for supply ude information ab out your spouse. If ir name and case n	ing correct information your your spouse. If more space is nee	ation. If you are If you are separa ded, attach a sep Answer every qu	married and not f ited and your spot parate sheet to thi	iling jointly, and use is not filing	your s with y	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your emplor		· · ·				
	information.			Debtor 1			Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	ate page Emplo out	loyment status				☐ Employed ☐ Not employed
		rs. Occup	ation	Financial Repr	esentative		
	Include part-time, s or self-employed w		yer's name	Western & Southern Life Insurance			<u>e</u>
	Occupation may in student or homema applies.		yer's address	8220 Allison Po	oint Blvd #10		Number Street
				Indianapolis City	IN 462 State Zip (City State Zip Code
		How I	ong employed th	ere? 6 month	าร		
	out 2) Civo D			-			
		etails About Mo			ng to report for a	ny line	, write \$0 in the space. Include your
nor	n-filing spouse unles	s you are separated					
•	ou or your non-filing ı need more space, a	•		er, combine the info	rmation for all e	nploye	rs for that person on the lines below. If
					For Debto	or 1	For Debtor 2 or non-filing spouse
2.		ss wages, salary, a). If not paid month			2. \$2,5	16.00	
3.	Estimate and list	monthly overtime	pay.		3. +	\$0.00	
4.	Calculate gross i	ncome. Add line 2	+ line 3.		4. \$2,5	16.00	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Pamela	Sue	Cowan		Case nur	nber (if l	(nown)			
		First Name	Middle Name	Last Name							
					Fo	or Debtor 1		ebtor 2			
							non-r	iling spo	use		
	Сор	y line 4 here			4.	\$2,516.00					
5.	List	ali payroli deduc	tions:								
	5a.	Tax, Medicare, a	nd Social Security de	ductions	5a.	\$452.00			_		
	5b.	Mandatory contr	ibutions for retireme	nt plans	5b.	\$0.00			_		
	5c.	Voluntary contri	butions for retiremen	t plans	5c.	\$0.00					
	5d.	Required repayn	nents of retirement fu	nd loans	5d.	\$0.00			_		
	5e.	Insurance			5e.	\$201.54					
	5f.	Domestic suppo	rt obligations		5f.	\$0.00					
		Union dues	J		5g.	\$0.00					
	_	Other deduction	S.								
		Specify:		1980.777	5h.+	\$0.00			_		
6.		l the payroll dedu - 5h.	ctions. Add lines 5a	a + 5b + 5c + 5d + 5e + 5f +	6.	\$653.54			_		
7.	Cal	culate total month	nly take-home pay.	Subtract line 6 from line 4.	7.	\$1,862.46					
8.	List	all other income	regularly received:								
			rental property and	from operating a	8a.	\$0.00					
		business, profes									
				d business showing business expenses, and							
	8b.	Interest and divi	idends		8b.	\$0.00					
	8c.	Family support dependent regu		non-filing spouse, or a	8c.	\$0.00		****			
		•	spousal support, child nt, and property settlen								
	8d.	Unemployment	compensation		8d.	\$0.00					
		Social Security			8e.	\$0.00					
	8f.	Other government include cash assistance (benefits under the or housing subsi		(if known) or any non-	0.5		-		_		
		Specify:			8f.	\$0.00			—		
		Pension or retir			8g.	\$0.00			—		
	8h.	Other monthly i	ncome.		8h. 🛨	¢0.00					
		Specify:			_	\$0.00					
9.	Ad	d all other income	e. Add lines 8a + 8b +	8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00				_	
10.	Cal Add	culate monthly in	ncome. Add line 7 + li e 10 for Debtor 1 and D	ne 9. ebtor 2 or non-filing spouse.	10.	\$1,862.46	+		_]=	=	\$1,862.46
11.	Inc frie	lude contributions nds or relatives.	from an unmarried par	e expenses that you list in S tner, members of your housel	hold, you	ır dependents, yo					
	Do	not include any ar	mounts already include	d in lines 2-10 or amounts tha	at are no	t available to pay	expens	es listed	in Sche	edu	le J.
	Sp	ecify:							11. +	+ _	\$0.00
12.	inc	d the amount in to ome. Write that an applies.	he last column of line mount on the Summary	10 to the amount in line 11 of Your Assets and Liabilitie	. The re s and Co	sult is the combin ertain Statistical I	ed mon nformati	thly on,	12.		\$1,862.46 ombined
		• •				_				n	nonthly income
13.	_	· –		ithin the year after you file	this forr	n?					
		1	lone.								
		Yes. Explain:									

Fi	ll in this inform	ation to identif	y your case:			l.	k if this is		
[Debtor 1	Pamela First Name	Sue Middle Name	Cowar Last Nar				led filing nent showing p 3 expenses as	
1 -	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Nar	ne	1	following	•	or the
Ι,	Jnited States Bankr	uptcy Court for the:	SOUTHERN D	ISTRICT OF	INDIANA		MM / DD	/ YYYY	-
1	Case number				.				
L	if known)					_]			
	ficial Form 10								12/15
		our Expense		acoplo ara fili	ng together, both a	re equa	ally respo	nsible for sur	
cor	rect information. I	ccurate as possible f more space is ne er (if known). Ans	eded, attach anotl	ner sheet to t	ng together, both a his form. On the to	p of any	y addition	nal pages, wri	te your
P	art 1: Descr	ibe Your House	hold						
1.	Is this a joint cas	se?							
2.	☐ No☐ Ye	Debtor 2 live in a so es. Debtor 2 must fi pendents?	le Official Form 106 No Yes. Fill out this	J-2, Expense	s for Separate House	tionshi	p to	Dependent's	Does dependent live with you?
	Do not list Debtor Debtor 2.	1 and	for each depende	nt		or 2		age	□ No
					<u>Daughter</u>			18	Yes
	Do not state the on names.	lependents'							□ No - □ Yes
									□ No
									Yes
									□ No - □ Yes
									□ No
									- ☐ Yes
3.	Do your expens expenses of peo yourself and yo	ople other than	☑ No □ Yes						
	Port Or Entire	nate Your Ongo	ing Monthly F	rnenses					
En	timata vaur avnan	sees as of vour har	kruntcy filing date	unless vou	are using this form	as a su	ıpplemen	t in a Chapter	13 case
to	report expenses a	is of a date after the ne applicable date.	e bankruptcy is fil	ed. If this is	a supplemental Scl	hedule .	J, check 1	he box at the	top of
ine su	clude expenses pa ich assistance and	id for with non-ca I have included it o	sh government as: on Schedule I: You	sistance if yo r Income (Off	u know the value o icial Form 106l.)	f		Your expen	ses
4.	The rental or ho	ome ownership ext tgage payments and	penses for your re	sidence. ound or lot.			4	·	\$350.00
	If not included i								
	4a. Real estate	taxes					4	a	\$0.00
		omeowner's, or rent	er's insurance				4	lb	\$0.00
		ntenance, repair, an		;			4	lc	\$0.00
		er's association or co					,	1d	\$0.00

Debto	1 Pamela	Sue	Cowan	Case number (if known)	
	First Name	Middle Name	Last Name		
				Your expense	es
5. <i>A</i>	dditional mortgage	payments for your resid	ence, such as home equity loans	5	\$0.00
	Itilities:				
e	a. Electricity, heat, r	natural gas		6a	\$0.00
6	b. Water, sewer, ga	rbage collection		6b	\$0.00
6		hone, Internet, satellite, a	nd	6c	\$270.00
á	cable services			6d.	\$0.00
	ood and housekeep		And the second s	7.	\$0.00
		en's education costs		8.	\$50.00
	Clothing, laundry, ar			9.	\$65.00
	Personal care produ			10.	\$50.00
	Wedical and dental e			11.	\$0.00
		ıde gas, maintenance, bu	s or train	12.	\$160.00
1	are. Do not include o	ar payments.		13.	\$0.00
13.	Entertainment, clubs magazines, and boo	s, recreation, newspaper ks	'S,		
14.	Charitable contribut	ions and religious donat	ions	14.	\$0.00
	I nsurance. Do not include insura	nce deducted from your p	ay or included in lines 4 or 20.		
	15a. Life insurance			15a	\$0.00
	15b. Health insuran	ce		15b.	\$0.00
	15c. Vehicle insura	nce		15c.	\$212.00
	15d. Other insuranc	e. Specify:		15d.	\$0.00
16.			your pay or included in lines 4 or 20.	40	#0.00
				16.	\$0.00
17.	Installment or lease	payments:		4-	0404.00
	17a. Car payments	for Vehicle 1		17a	\$424.00
	17b. Car payments	for Vehicle 2			\$0.00
	17c. Other. Specify	Storage Unit			\$280.00
			1444		\$0.00
18.	Your payments of a deducted from your	limony, maintenance, ar pay on line 5, Schedule	nd support that you did not report as I, Your Income (Official Form 106I).	18	\$0.00
19.		u make to support other	s who do not live with you.	. 19.	\$0.0 <u>0</u>
	Specify:				Ψ0.00

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Debt	or 1	Pamela	Sue	Cowan	Case number (if known)							
		First Name	Middle Name	Last Name								
20.	Othe Sche	er real property edule I: Your Inc	expenses not included ir come.	lines 4 or 5 of this form or o	n							
	20a.	Mortgages on	other property		20a	\$0.00						
	20b.	Real estate ta	xes		20b	\$0.00						
	20c.	Property, hom	eowner's, or renter's insura	nce	20c	\$0.00						
	20d.	Maintenance,	repair, and upkeep expens	es	20d	\$0.00						
	20e.	Homeowner's	association or condominiu	m dues	20e	\$0.00						
21.	Othe	er. Specify:			21. +							
22. C	Calc	alculate your monthly expenses.										
	22a.	Add lines 4 th	rough 21.		22a	\$1,861.00						
	22b.	Copy line 22 (monthly expenses for Deb	tor 2), if any, from Official Forn	n 106J-2. 22b							
	22c.	Add line 22a	and 22b. The result is you	monthly expenses.	22c	\$1,861.00						
23.	Calo	culate your mor	nthly net income.									
	23a	. Copy line 12 (your combined monthly inc	come) from Schedule I.	23a	\$1,862.46						
	23b	. Copy your mo	onthly expenses from line 2	2c above.	23b	\$1,861.00						
	23c		monthly expenses from your monthly net income.	ur monthly income.	23c	\$1.46						
24.	Do	you expect an i	ncrease or decrease in ye	our expenses within the year	after you file this form?							
	For pay	example, do you ment to increase	u expect to finish paying for or decrease because of a	your car loan within the year or modification to the terms of yo	or do you expect your mortgage our mortgage?							
		No	ALCO CONTRACTOR OF THE CONTRAC		and the second s							
		Yes. Explain h	iere:									
			to a state of the			AND THE STREET						

Fill in this info	ormation to id	entify your case:	:	
Debtor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for	the: SOUTHERN D	ISTRICT OF INDIANA	
Case number (if known)			1001134-197	☐ Check if this is an amended filing
Official Form	106Dec			
		dividual Debt	or's Schedules	12/15
concealing proper \$250,000, or impri	rty, or obtaining r	noney or property by		les. Making a false statement, ankruptcy case can result in fines up to and 3571.
Sig	III Delow	· · · · · · · · · · · · · · · · · · ·		
Did you pay o	or agree to pay so	omeone who is NOT	an attorney to help you fill ou	t bankruptcy forms?
□ No				
⊘ Yes. Na	ame of person R	egenia Smith		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt		lare that I have read	the summary and schedules	filed with this declaration and that they are
x on	n Co		X	
Pamela Si	ue Cowan, Debtor	1	Signature of Debtor 2	
Date MM	-25-1 1/DD/YYYY	1	DateMM / DD / YYYY	_

Fil	l in this info	ormation to ide	ntify your case:			
Del	btor 1	Pamela	Sue	Cowan		
		First Name	Middle Name	Last Name		
	btor 2	First Name	Middle Name	Last Name		
	oouse, if filing)					
Un	ited States Bar	kruptcy Court for th	ne: <u>SOUTHERN D</u>	ISTRICT OF INDIANA	—	
1	se number				☐ Check if this is an	
(IF I	known)				amended filing	
Off	icial Form	107				
			ffairs for Ind	ividuals Filing fo	r Bankruptcy	04/16
Be a	is complete ar ect informatio	nd accurate as pos n. If more space is	s needed, attach a	separate sheet to this for	er, both are equally responsible for supplying n. On the top of any additional pages, write	
you	r name and ca	se number (if knov	wn). Answer every	question.		
	- Cir	Dataila Abau	4 Varm Marital S	Status and Where Yo	Llived Refore	
Pá	art 1: Giv	e Details Abou	t Your Wartar S	status and where ro	Lived Belote	
1.	What is your	current marital sta	itus?			
	☐ Married					
	✓ Not marrie				_	
2.	=	st 3 years, have yo	ou lived anywhere o	other than where you live	now?	
	✓ No ☐ Yes. List	all of the places vo	u lived in the last 3 y	ears. Do not include wher	e you live now.	
,					a community property state or territory?	
3.	(Community p	property states and i	territories include Ar	izona, California, Idaho, Lo	uisiana, Nevada, New Mexico, Puerto Rico, Texas,	
	Washington,	and Wisconsin.)				
	☑ No		Sahadula U. Varr Ca	dobtors (Official Form 108	-1)	
	Yes. Mai	te sure you fill out S	scriedule in: Your Co	debtors (Official Form 106	η.	

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Debtor 1		Pamela Sue First Name Middle Name		Cowan Last Name	Case num	nber (if known)	
4.	Fill in th	u have any inco	of income you receive		nesses, including part	ar or the two previous cale -time activities. nder Debtor 1.	ndar years?
	□ No			Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ary 1 of the curr ou filed for bank		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$3,774.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		t calendar year: to December 31,		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$27,776.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		endar year befo		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$32,000.00	Wages, commissions, bonuses, tips Operating a business	
5.	Includ	e income regard oloyment; and ot ambling and lotte	less of whether that her public benefit pa	avments: pensions: rental inc	es of other income are come; interest; divider	alimony; child support; Soci ids; money collected from la eceived together, list it only	wsuits, royaities,
	ΔN			om each source separately.	Do not include income	that you listed in line 4.	

Debt	or 1	Pamela First Name	Sue	e dle Name	Cowan Last Name	C	Case number (if know	m)			
Pa	rt 3:	List Certa	in Paym	ents You Ma	ade Before Y	ou Filed for Baı	nkruptcy				
6.	Are eith	ner Debtor 1's	or Debtor	2's debts prim	arily consumer	debts?					
	□ No.	Neither Deb	otor 1 nor l an individ	Debtor 2 has pual primarily for	rimarily consun a personal, fami	n er debts. <i>Consun</i> ily, or household pu	ner debts are defined rpose."	l in 11 U.S.C. § 101(8) as			
		During the 9	0 days bef	ore you filed fo	r bankruptcy, did	you pay any credito	or a total of \$6,425* o	or more?			
		☐ No. Go	to line 7.								
		tot	al amount	you paid that cr	whom you paid a total of \$6,425* or more in one or more payments and the creditor. Do not include payments for domestic support obligations, such as Also, do not include payments to an attorney for this bankruptcy case.						
		* Subject to	adjustmer	it on 4/01/19 an	d every 3 years	after that for cases	filed on or after the d	ate of adjustment.			
	✓ Yes	s. Debtor 1 or	Debtor 2	or both have p	rimarily consur	ner debts.					
		During the 9	00 days be	fore you filed fo	r bankruptcy, dic	I you pay any credit	or a total of \$600 or r	more?			
		□ No. Go	to line 7.								
		— cre	editor. Do	not include pay	ments for domes	total of \$600 or morestic support obligation for this bankruptcy	e and the total amou ons, such as child su case.	nt you paid that pport and alimony.			
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for			
		nance Co.			Dec, Jan,	\$1,392.00	\$14,458.00	_			
	litor's nam Box 49				Feb			☑ Car ☐ Credit card			
Num								☐ Loan repayment			
					_			Suppliers or vendors			
And	derson		IN State	46015 ZIP Code				Other			
7.	Insider corpora agent, such as	s include your r ations of which including one fo s child support	elatives; a you are an or a busine and alimor	ny general part officer, directo ess you operate ny.	ners; relatives of r. person in contr	any general partne ol, or owner of 20%	rs; partnerships of w or more of their voti	e who was an insider? hich you are a general partner; ng securities; and any managing s for domestic support obligations			

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Debt	or 1	Pamela	Sue	Cowan	Case number (if known)
0	Mithin	First Name	Middle Name	Last Name	ayments or transfer any property on account of a debt that
		ed an insider?	ou med for bankiup	icy, did you make any pa	tynients of transfer any property on account of a acceleration
	Include	payments on de	bts guaranteed or co	osigned by an insider.	
	☑ No		nte that benefited as	incidor	
	∐ Ye	s. List all payme	nts that benefited ar	i insider.	
Pa	art 4:	Identify I e	nal Actions Re	possessions, and Fo	preclosures
					any lawsuit, court action, or administrative proceeding?
9.	List all	such matters, incations, and contr	cluding personal inju	ry cases, small claims acti	ions, divorces, collection suits, paternity actions, support or custody
	✓ No	s. Fill in the deta	iils.		
10.			ou filed for bankru	otcy, was any of your pro	perty repossessed, foreclosed, garnished, attached,
		, or levied? all that apply and	I fill in the details be	low.	
	استسا	o. Go to line 11. s. Fill in the info	rmation below.		
11.				uptcy, did any creditor, in make a payment becaus	ncluding a bank or financial institution, set off any se you owed a debt?
	☑ No	s. Fill in the deta	ails.		
12.	Within credite	1 year before y ors, a court-app	ou filed for bankru ointed receiver, a c	ptcy, was any of your pro ustodian, or another offic	operty in the possession of an assignee for the benefit of cial?
	☑ No				
D.	art 5:		n Gifts and Coi	atributions	
					lifts with a total value of more than \$600 per person?
13.			you med for bankr	upicy, did you give any g	ifts with a total value of more than \$600 per person?
	☐ Ye	o es. Fill in the deta	ails for each gift.		
14.		2 years before charity?	you filed for bankr	uptcy, did you give any g	ifts or contributions with a total value of more than \$600
	☑ No		ails for each gift or c	contribution.	

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Deb	tor 1	Pamela First Name		Sue · Middle Name	Cowan Last Name	Case number (if kr	nown)	
Pa	art 6:	List Ce	tain Lo	osses				
15.		1 year befoi lisaster, or ç			otcy or since you filed for	bankruptcy, did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	s. Fill in the	details.					
Pa	art 7:	List Ce	rtain Pa	ayments or	Transfers			
16.	anyone	you consu	Ited abo	ut seeking ban	kruptcy or preparing a ba	lse acting on your behalf pay of ankruptcy petition? ing agencies for services require		·
	□ No	s. Fill in the			•		,	•
	jenia S on Who V				Description and value o	f any property transferred	Date payment or transfer was made	Amount of payment
620 Num		as Tr, Ste. : reet	230				02/20/2017	\$250.00
	anapol	is	IN_	46268				11.18.1.11.11.11.11.11.11.11.11.11.11.11
City	il or websi	ite address	State	ZIP Code				
		Made the Paym	ant if blat	Vou				
	Within anyone	1 year before who promi	re you fil sed to h	led for bankrup elp you deal w		lse acting on your behalf pay on a secting on your behalf pay on ake payments to your creditor		perty to
	✓ No	s. Fill in the	details.					
18.	proper Include	ty transferre both outrigh	ed in the t transfe	ordinary courses and transfers	se of your business or fir	s granting of a security interest o	•	
	Mo □ Ye	s. Fill in the	details.					
19.	you are ☑ No	e a beneficia	ary? (T		ruptcy, did you transfer a called asset-protection de	ny property to a self-settled tr vices.)	ust or similar devic	e of which

Deb	tor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)
Pa	art 8:	List Certain	Financial Accou	ınts, Instrument	s, Safe Deposit Boxes, and Storage Units
20.	benefit	, closed, sold, mo	ved, or transferred	?	I accounts or instruments held in your name, or for your ts; certificates of deposit; shares in banks, credit unions, brokerage
	☑ No	, pension funds, co s. Fill in the details		tions, and other finan	cial institutions.
21.	Do you		you have within 1 y	year before you filed	for bankruptcy, any safe deposit box or other depository
	☑ No □ Yes	s. Fill in the details			
22.	☑ No	ou stored propert s. Fill in the details		or place other than y	our home within 1 year before you filed for bankruptcy?
Pa	art 9:	Identify Prop	perty You Hold	or Control for So	meone Else
23.	_	hold or control a in trust for some		meone else owns?	Include any property you borrowed from, are storing for,
	☑ No □ Yes	s. Fill in the details	i.		
P	art 10:	Give Details	About Environ	mental Informati	on
For	the pur	oose of Part 10, th	e following definiti	ons apply:	
ı	hazardo	us or toxic substa	nce, wastes, or ma	terial into the air, la	egulation concerning pollution, contamination, releases of nd, soil, surface water, groundwater, or other medium, substances, wastes, or material.
				as defined under ar including disposal	y environmental law, whether you now own, operate, or sites.
				ronmental law defind ntaminant, or simila	es as a hazardous waste, hazardous substance, toxic r item.
Rep	ort all n	otices, releases, a	and proceedings th	at you know about,	regardless of when they occurred.
24.	Has an law?	y governmental u	nit notified you tha	t you may be liable	or potentially liable under or in violation of an environmental
	☑ No	s. Fill in the details	s .		

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Deb	otor 1	Pamela First Name	Sue Middle Name	Cowan Last Name	Case number (if known)
25.	☑ No	ou notified any ç s. Fill in the detai		any release of hazardo	us material?
26.	Have y orders.		in any judicial or ad	ministrative proceeding	under any environmental law? Include settlements and
	☑ No ☐ Yes	s. Fill in the deta	ils.		
P	art 11:	Give Detail	s About Your Bu	siness or Connect	ons to Any Business
27.	Within busine		ou filed for bankrup	tcy, did you own a busi	ness or have any of the following connections to any
		A member of a A partner in a p An officer, dire	limited liability compa partnership ctor, or managing exe	a trade, profession, or o any (LLC) or limited liabili cutive of a corporation or equity securities of a	
	النتا		ove applies. Go to Pa apply above and fill in	art 12. n the details below for ea	ch business.
28.			ou filed for bankrup s, creditors, or other		ncial statement to anyone about your business? Include
	□ No □ Ye	s. Fill in the deta	ils below.		
Р	art 12:	Sign Belov			
tha pro or I	t answe pperty by both. 18	rs are true and c r fraud in connec	orrect. I understand ction with a bankrup 341, 1519, and 3571	l that making a false sta tcy case can result in fi	attachments, and I declare under penalty of perjury atement, concealing property, or obtaining money or nes up to \$250,000, or imprisonment for up to 20 years, ebtor 2
Did	l you att	ach additional p	ages to Your Statem	ent of Financial Affairs	for Individuals Filing for Bankruptcy (Official Form 107)?
	No Yes				
Did	l you pa	y or agree to pay	someone who is n	ot an attorney to help y	ou fill out bankruptcy forms?
	No Yes. N	ame of person	Regenia Smith	3,000.	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inf	iarmatian ta i	dentify your ease.			Ī		
,		dentify your case:					
Debtor 1	Pamela First Name	Sue Middle Name	Cowa Last Na				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ne			
United States Ba	nkruptcy Court fo	r the: SOUTHERN DI	STRICT C	F INDIANA			
Case number (if known)	W			99,000		☐ Check if amende	f this is an ed filing
Official Form	<u> 108</u>						
Statement of	of Intention	for Individuals	Filing	Under Chapt	ter 7		12/15
Marian and an inchi	detro dittioner con de	hautau 7 .va., m., at	fill out this	form if:			
•	_	er chapter 7, you must	. IIII OUL IIIIS	ionn ii:			
		by your property, or	4	. J			
•		perty and the lease ha					
	hever is earlier,	ourt within 30 days aff unless the court exter					
If two married pe Both debtors mu	-	gether in a joint case, the form.	both are e	qually responsible	for supplying corre	ct information.	
		possible. If more space e and case number (if		l, attach a separat	te sheet to this form	. On the top of any	
Part 1: Lis	st Your Credi	tors Who Hold Sec	cured Cla	ims			
-	litors that you lis ormation below.	sted in Part 1 of Sched	dule D: Cre	litors Who Hold C	Claims Secured by P	roperty (Official Form 1	06D),
Identify the	creditor and the	property that is collate	eral	What do you inter property that secu		Did you claim the as exempt on Sch	
Creditor's name:	Indiana Fin	ance Co.		Surrender the Retain the pro	property. pperty and redeem it.	□ No □ Yes	
Description of property securing deb	miles)	Lucerne (approx. 10	04000	Reaffirmation	operty and enter into a Agreement. operty and [explain]:	a	
Part 2: Li	st Your Unex	oired Personal Pro	perty Le	ases			
fill in the informa	tion below. Do	erty lease that you list not list real estate leas unexpired personal pr	es. Unexp	ired leases are lea	ises that are still in e	xpired Leases (Official Feffect; the lease period I U.S.C. § 365(p)(2).	Form 106G) has not
Describe vo	ur unexpired pe	rsonal property leases	;			Will this lease be as	ssumed?

None.

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Debtor 1	Pamela	Sue	Cowa	an Case number (if known)	
	First Name	Middle Name	Last Na	ame	_
Part 3:	Sign Below				_
				my intention about any property of my estate that secures a debt and	
person	al property that is su	ıbject to an unexp	ired lease.		
x \/_	un C		x		
Pamela	Sue Cowan, Debtor	1	Sig	gnature of Debtor 2	
ر پ Date	<u>) -) </u>)	Da	ate	
N	MM / DD / YYYY			MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge	
-	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Debtor 1	Pamela	Sue	Cowan
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: SOUTHERN D	ISTRICT OF INDIAN
Case number (if known)		Ch	apter 7

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 3. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1: Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

	The bankruptcy petition preparer	Regenia Sm	ith	_has notified me of
	Name any maximum allowable fee before prepa	ring any document for filing or	accepting any fee.	
X	Pamela Sue Cowan, Debtor 1, acknowledging	receipt of this notice	Date	
X	Signature of Debtor 2, acknowledging receipt of	of this notice	Date	

Debtor 1	Pamela	Sue	Cowan	Case	nun	hber (if known)
	First Name	Middle Name	Last Name			
Part 2:	Declaration	and Signatui	e of the Bankrupto	y Petition Prepar	er	
Under per	nalty of perjury, I d	eclare that:				
■ lamal	bankruptcy petition	preparer or the of	ficer, principal, responsil	ble person, or partner	of a	bankruptcy petition preparer;
■ lormy	firm prepared the d	ocuments listed t	elow and gave the debto	or a copy of them and t		Notice to Debtor by Bankruptcy Petition
Prepare	er as required by 11	tablished accord), 110(h), and 342(b); an ing to 11 U.S.C. & 110(h	o) setting a maximum fe	ee fo	or services that bankruptcy petition
prepare	ers may charge, I or ing any fee from the	my firm notified t	he debtor of the maximu	im amount before prep	arin	g any document for filing or before
	nia Smith		eparer	Elite Docume	ent	Services
Printed			e, if any	Firm name, if it	app	lies
Numbe				_		
Indiar	napolis	IN	46268	3173287911		
City		State	e ZIP Code	Contact phone		
check:	rm prepared the do	cuments check	ed below and the comp	leted declaration is n	nade	a part of each document that I
	tary Petition (Form	_	Schedule I (Form 106			Chapter 11 Statement of Your Current Monthly Income (Form 122B)
	ment About Your So pers (Form 121)	_	✓ Schedule J (Form 100 Declaration About an			Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period
	mary of Your Assets Certain Statistical Int	and Liabilities	Schedules (Form 106	SDec)		(Form 122C-1)
(Form	n 106Sum)	[Statement of Intention	al Affairs (Form 107) n for Individuals Filing		Chapter 13 Calculation of Your Disposable Income (Form 122C-2)
☑ Sche	dule A/B (Form 106	A/B) l	Under Chapter 7 (For			Application to Pay Filing Fee in Installments
☑ Sche	dule C (Form 106C)		✓ Chapter 7 Statement	of Your Current	N.	(Form 103A)
	dule D (Form 106D)		Monthly Income (For			Application to Have Chapter 7 Filing Fee Waived (Form 103B)
141	dule E/F (Form 106	1	Statement of Exempt of Abuse Under § 70	tion from Presumption 7(b)(2)		•
	dule G (Form 106G	•	(Form 122A-1Supp)		⊻	A list of names and addresses of all creditors (creditor or mailing matrix)
✓ Scue	dule H (Form 106H	,	Chapter 7 Means Tes (Form 122A-2)	st Calculation		Other
Bankrupt documen	cy petition preparer	s must sign and g laration applies, t	he signature and Social	Security number of ea	ch p	e bankruptcy petition preparer prepared the reparer must be provided. 11 U.S.C. § 110.
-	nture of bankruptcy insible person, or pa		or officer, principal,	3 1 3 - 8 Social Security number	. <u>8</u> er of	person who signed Date MM / DD / YYYY
	enia Smith ed name					
Х		P.				Date
Signa	ature of bankruptcy onsible person, or pa		or officer, principal,	Social Security number	er of	person who signed MM / DD / YYYY
Drinte	ed name					

B2800 (Form 2800) (12/15)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF INDIANA INDIANAPOLIS DIVISION

In	re Pamela Sue Cowan	Case No).	
	Debtor	Chapter		7
				PUPTCY PETITION PREPARER operes the petition. 11 U.S.C. § 110(h)(2).]
1.	prepared or caused to be prepared one bankruptcy case, and that compensation	e or more documents for filing by the on paid to me within one year before	ne a re tl	n attorney or employee of an attorney, that I above-named debtor(s) in connection with this the filing of the bankruptcy petition, or agreed to be n of or in connection with the bankruptcy case is
	For document preparation services, I h	nave agreed to accept		\$250.00
	Prior to the filing of this statement I have	ve received		\$250.00
	Balance Due			\$0.00
2.	I have prepared or caused to be prepared or caused to be prepared Petition, Schedules A-J, Statement of Matrix and provided the following services (items)	of Financial Affairs, Statement of		e): ntentions, Statement of Monthly Income, Creditor
3.	The source of the compensation paid t	to me was:		
	☑ Debtor □	Other (specify)		
4.	The source of compensation to be paid	d to me is:		
	☑ Debtor □	Other (specify)		
5.	The foregoing is a complete statement filed by the debtor(s) in this bankruptcy		t for	or payment to me for preparation of the petition
6.	To my knowledge no other person has case except as listed below:	s prepared for compensation a doc	ume	nent for filing in connection with this bankruptcy
	NAME			SOCIAL SECURITY NUMBER

X Case 17-00983-13G-7A Doc 1 File	ed 02/23/17 EOD 02/23/17 14:20:46 313-88-7555 Social Security number of bankruptcy petition preparer*	Pg 56-of 57 Date
Regenia Smith, Preparer Printed name and title, if any, of	6201 La Pas Tr, Ste. 230 Indianapolis, IN 46268	
Bankruptcy Petition Preparer	Address	

* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF INDIANA INDIANAPOLIS DIVISION

IN RE: Pamela Sue Cowan

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The	e above named De	btor hereby ver	ifies that th	ne attached l	list of creditor	s is true an	d correct to the	e best of	his/her
knowledge	e.								

Date 2 1 1	Signature Pamela Sue Cowan
Date	Signature